CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating webbased and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red *.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form-please include any quotes from your manuscript in QUOTATION MARKS,

or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF _AND_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile

Health Interventions

J Med Internet Res 2011;13(4):e126 URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923 PMID: 22209829

* Required

Your response exceeds the limit. Try shortening some of your answers.

Your name *

First Last

Molly Vierhile

Primary Affiliation (short), City, Country *

University of Toronto, Toronto, Canada

Stanford University, Stan

Your e-mail address *

abc@gmail.com

mvierhil@stanford.edu

Title of your manuscript *

Provide the (draft) title of your manuscript.

Woebot: A Fully Automated Conversational Agent to Deliver Cognitive Behavior Therapy to Young Adults with Symptoms of Depression and Anxiety: Randomized Controlled Trial.

Article Preparation Status/Stage *

At which stage in your article preparation are you currently (at the time you fill in this form)

- not submitted yet in early draft status
- onot submitted yet in late draft status, just before submission

O 1 11 11	a journal but not reviewed yet
submitted to a	a journal and after receiving initial reviewer comments
submitted to a	a journal and accepted, but not published yet
published	
Other:	
Journal *	
	ow where you will submit this paper (or if it is already submitted), please provide the journal JMIR, provide the journal name under "other")
not submitted	yet / unclear where I will submit this
Journal of Me	dical Internet Research (JMIR)
Other:	
number can be for paper is already p DOI, to be found	ubmission, please provide the manuscript tracking number under "other" (The ms tracking bund in the submission acknowledgement email, or when you login as author in JMIR. If the bublished in JMIR, then the ms tracking number is the four-digit number at the end of the at the bottom of each published article in JMIR) r (yet) / not (yet) submitted to / published in JMIR
Other:	
TITLE AN	D ABSTRACT E: Identification as a randomized trial in the title
TITLE AN 1a) TITLE 1a) Does your p	
TITLE AN 1a) TITLE 1a) Does your p	E: Identification as a randomized trial in the title

includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 1a-i? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Woebot is a web-based conversational agent that can be accessed either on a computer or on a mobile device by a direct link to an instant messenger app.

1a-ii) Non-web-based components or important co-interventions in title

Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 1a-ii?

Not applicable. The entire interception was well based		
Not applicable - the entire intervention was web-based.		
The second secon		
	1	
	00	

1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

1 2 3 4 5

subitem not at all important O O o essential



Does your paper address subitem 1a-iii? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The target group were young adults with symptoms of anxiety or depression.

1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of

systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it) 1 2 3 4 5 subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential Does your paper address subitem 1b-i? * Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study The intervention was either "two weeks of self-help content derived from CBT with a text-based conversational agent ("Woebot")" or "the National Institute of Mental Health ebook; "Depression in College Students". 1b-ii) Level of human involvement in the METHODS section of the ABSTRACT Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it) 1 2 3 4 5 subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential Does your paper address subitem 1b-ii? Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Woebot is a fully automated chatbot that we designed as an intervention for participants. However, a therapist consistently checked participants' conversations to intervene in case of adverse events or active suicidality.

1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5
subitem not at all important O O O essential

Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants were "recruited online from a university community social media site" and randomized to a Woebot group or an Informational Control group. Outcomes were determined from the web-based versions of the PHQ-9, GAD-7, and PANAS at baseline (BL) and 2-3 weeks later (T2).

1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5 subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional

information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"N=70 individuals were randomized to receive "Woebot (n=34)" or be in an "Informational Control group (n=36)". "Participants in the Woebot group engaged with the conversational an agent average of 12.14 (SD=12.23) times over the study period". "Intent-to-treat univariate analysis of covariance revealed a significant group difference on depression such that those in the Woebot group significantly reduced their symptoms of depression over the study period as measured by the PHQ-9 (F=6.47; p=.01) while those in the Information Control group did

1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5

subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 1b-v?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This is not applicable for the current study because it was not a negative trial.

INTRODUCTION

2a) In INTRODUCTION: Scientific background and explanation of rationale

2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as stand-alone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 2a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Internet interventions for anxiety and depression have empirical support with outcomes comparable to therapist-delivered CBT. Our objective was to "assess the feasibility of delivering CBT in a conversational interface via an automated bot in a way that facilitates engagement and reduction in symptoms".

2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropiate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 2a-ii? *

"About 70% [of patients] show interest in using mobile apps to self-monitor and self-manage their mental health. Internet interventions for anxiety and depression have empirical support with outcomes comparable to therapist-delivered CBT."

2b) In INTRODUCTION: Specific objectives or hypotheses

Does your paper address CONSORT subitem 2b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We hypothesized that conversation with a therapeutic process-oriented conversational agent would lead to greater improvement in symptoms, and that receiving psychoeducational material in a conversational manner would be more acceptable to those who received it when compared to an Informational Control group.

METHODS

3a) Description of trial design (such as parallel, factorial) including allocation ratio

Does your paper address CONSORT subitem 3a? *

"Participants were randomized via computer algorithm to receive either a direct link to begin chatting with Woebot in an instant messenger application, or the NIMH's ebook on depression among college students."

3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

Does your paper address CONSORT subitem 3b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

After the study commenced, we noticed an influx of fake spam bot registrations. Thus, "to guard against compromise e.g., from malicious bots, all potential participants were sent an email requesting that they respond denoting their confirmation."

3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

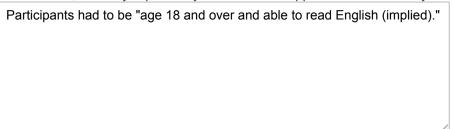
Does your paper address subitem 3b-i?

See above in section 3b-i.	

4a) Eligibility criteria for participants

Does your paper address CONSORT subitem 4a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

1 2 3 4 5 subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 4a-i?

Participants were expected to be computer/internet literate because they were recruited from "social media websites targeting a US university community".

4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

1 2 3 4 5

subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 4a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants were recruited "using a flyer posted on social media websites targeting a US university community". This was a purely web-based trial with no face-to-face components. Participants were anonymous, though email address was used for confirmation and for payment purposes. We ensured that having multiple identities was not possible when we requested an email confirmation for each signup.

4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

1 2 3 4 5

subitem not at all important O O o essential

Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants were presented with an IRB-approved information sheet that explained the study to which they indicated their agreement via checkbox.

4b) Settings and locations where the data were collected

Does your paper address CONSORT subitem 4b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Data were collected via secure Stanford Medicine Qualtrics surveys. Usage data were gathered by Life Ninja on aggregate from study participants but due to de-identification, were not associated with the user.

4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-based trials) or otherwise.

Does your paper address subitem 4b-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information

not in the ms, or briefly explain why the item is not applicable/relevant for your study

The measures that we implemented are listed in our Methods section. We asked participants to complete the PHQ-9, GAD-7, PANAS, and acceptability and usability questions at baseline and end of treatment, respectively.

4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention. (Not a required item – describe only if this may bias results)

1 2 3 4 5
subitem not at all important O O essential

Does your paper address subitem 4b-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Only study materials (i.e, flyer, information sheet, and study surveys were "branded" with Stanford logos. Stanford is not associated with Woebot and Woebot was clearly presented to participants as a separate entity.

5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

5-i) Mention names, credential, affiliations of the developers, sponsors, and owners

Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

	1	2	3	4	5	
subitem not at all important	0	0	0	0	0	essential

Does your paper address subitem 5-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The second author (AMD) is the founder of a commercial entity Life Ninja that created the intervention ("Woebot") that is the subject of this trial and therefore has financial interest in that company. Neither KKF nor MV have any financial interest in Life Ninja. The Life Ninja Project covered the cost of participant incentives, though the academic institution made the payments."

The Life Ninja Project is currently funded privately by angel investment.

5-ii) Describe the history/development process

Describe the history/development process of the application and previous formative evaluations (e.g., focus groups, usability testing), as these will have an impact on adoption/use rates and help with interpreting results.

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The Life Ninja project was founded in July 2016 as a company building evidence-based innovative scaleable mental health services for young people. They began creating psychologically-themed video games, and created a conversational agent that was highly popular among an initial cohort of college students.

5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Students from the original cohort of users were interviewed about their experience and their comments were integrated into the bot used for the purpose of the study. The bot remained consistent throughout the research study besides minor bug fixes.

5-iv) Quality assurance methods

Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 5-iv?

During both prototype testing and the study itself, both the Life Ninja Founder (AD) and Lead Engineer monitored conversations in real time where possible. Where conversations took place at other times, they were read as soon as possible after the fact. Errors were logged systematically and resolved as soon as practicable.

5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used

Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting.

1 2 3 4 5

subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 5-v?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

A screen-capture video showing mood-monitoring process and typical presentation of psychoeducational material (in this case, teaching about cognitive distortions) is presented in Multimedia Appendix 1.

5-vi) Digital preservation

Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, webcitation.org, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

1 2 3 4 5

subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 5-vi?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The intervention can be reached directly at m.me/drwoebot. In addition, there is an animated screen video of a standard interaction included as Multimedia Appendix A.

5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 5-vii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants in both groups could access the content either on a mobile device or computer. They were paid \$20 at end of treatment.

5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to

individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and – if computer-mediated communication is a component – whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 5-viii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Woebot is an automated conversational agent used within an instant messenger application designed to deliver CBT in the format of brief, daily conversations and mood tracking. In the Information Control condition, participants were directed to the National Institutes of Mental Health (NIMH) publication entitled; "Depression in College Students.""

5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

Does your paper address subitem 5-ix?

"For those in the Woebot condition, total number of interactions with the bot over the two-week period were recorded. An interaction was deemed to have taken place if mood and context data were recorded." We expect that those in the Informational Control condition accessed the information at least once.

5-x) Clarify the level of human involvement

Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 - generalizability).

1 2 3 4 5

subitem not at all important O O o essential

Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Both the Life Ninja Founder (AD) and Lead Engineer monitored conversations in real time where possible; i.e., typically between the hours of 8am and 10pm PST.

5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 - generalizability).

1 2 3 4 5

subitem not at all important O O o essential



Does your paper address subitem 5-xi? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Over the course of the study, Woebot would reach out to participants on a roughly every-other-day basis. However, individuals could also reach out to Woebot at any point during the study if they felt that they needed or could benefit from an interaction on any given day.

5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 5-xii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There were no co-interventions taking place in addition to the intervention in question.

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when

they were assessed

Does your paper address CONSORT subitem 6a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Our primary outcome was whether or not we could decrease depressive and anxious symptomatology as measured by the PHQ-9, the GAD-7, and the PANAS. Our secondary outcome was whether or not Woebot would be more effective than the National Institute of Mental Health's ebook at reducing symptomatology on these measures.

6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].

Does your paper address subitem 6a-i?

Copy and paste relevant sections from manuscript text

The questionnaires we used included the PHQ-9, GAD-7, and PANAS. These are widely used, reliable, validated measures. They are self-report questionnaires and have been validated for online use.

6a-ii) Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored

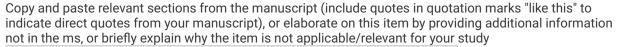
Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.

1 2 3 4 5

While most individuals completed an interaction (e.g. the psychoeducational portion) once they had started, a minimally acceptable interaction was considered to have taken place if mood information had been recorded. Sa-iii) Describe whether, how, and when qualitative feedback from participants was obtained Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through email feedback forms, interviews, focus groups). 1 2 3 4 5 Subitem not at all important essential	subitem not at all important 🔘 🔘 💿 oessential
psychoeducational portion) once they had started, a minimally acceptable interaction was considered to have taken place if mood information had been recorded. 6a-iii) Describe whether, how, and when qualitative feedback from participants was obtained Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through email feedback forms, interviews, focus groups). 1 2 3 4 5 Subitem not at all important essential Does your paper address subitem 6a-iii? Copy and paste relevant sections from manuscript text Self-report qualitative feedback was gathered through a mix of likert-scale	Does your paper address subitem 6a-ii? Copy and paste relevant sections from manuscript text
Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through email feedback forms, interviews, focus groups). 1 2 3 4 5 Subitem not at all important	psychoeducational portion) once they had started, a minimally acceptable interaction was considered to have taken place if mood information had
Subitem not at all important O O O essential Does your paper address subitem 6a-iii? Copy and paste relevant sections from manuscript text Self-report qualitative feedback was gathered through a mix of likert-scale	6a-iii) Describe whether, how, and when qualitative feedback from participants was obtained Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through emafeedback forms, interviews, focus groups).
Does your paper address subitem 6a-iii? Copy and paste relevant sections from manuscript text Self-report qualitative feedback was gathered through a mix of likert-scale	1 2 3 4 5
Copy and paste relevant sections from manuscript text Self-report qualitative feedback was gathered through a mix of likert-scale	subitem not at all important 🔾 🔾 🔾 essential
Copy and paste relevant sections from manuscript text Self-report qualitative feedback was gathered through a mix of likert-scale	
Self-report qualitative feedback was gathered through a mix of likert-scale	Does your paper address subitem 6a-iii?
	Copy and paste relevant sections from manuscript text

6b) Any changes to trial outcomes after the trial commenced, with reasons

Does your paper address CONSORT subitem 6b? *



There were no changes to trial outcomes after the trial commenced.

7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed

7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.

1 2 3 4 5
subitem not at all important O O essential

Does your paper address subitem 7a-i?

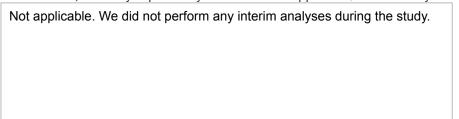
Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Statistical power calculations (ANCOVA) revealed that a sample size of 70 would have sufficient (80%) power to detect a moderate-large effect size (Cohen's d =.4) for depression. These power calculations accounted for a 25% attrition rate.

7b) When applicable, explanation of any interim analyses and stopping guidelines

Does your paper address CONSORT subitem 7b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

Does your paper address CONSORT subitem 8a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Confirmed participants were randomized via computer algorithm to receive either a direct link to begin chatting with Woebot in an instant messenger application, or the NIMH's ebook on depression among college students".

8b) Type of randomisation; details of any restriction (such as blocking and block size)

Does your paper address CONSORT subitem 8b? *

We conducted simple randomization according to a parallel group design.

9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Does your paper address CONSORT subitem 9? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

A computer algorithm generated a number between 0 and 1, where group allocation depended on numbers greater than or less than .5.. No concealment occurred.

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? *

The random allocation sequence was created by the Lead Engineer at The Life Ninja Project. Participants were randomly assigned to the intervention group after confirming their email address. Participants were enrolled by MV, a research coordinator at Stanford University.

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

1 2 3 4 5
subitem not at all important \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 11a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

While the Information sheet did not mention randomization, we cannot be certain that all individuals were completely blinded. Two participants contacted the research coordinator specifically asking about using Woebot. These individuals were directed to sign up to the study where they had equal chance of being assigned to either arm. In this respect, at least a small number of participants were not blinded. The study was unblinded to investigators.

11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

1 2 3 4 5 subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

As explained in Item 11 a-i above, we believe that at least 2 of the participants knew about the intervention of interest.

11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

Does your paper address CONSORT subitem 11b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The interventions had similar content, but were delivered in different methodologies. Woebot was primarily CBT-oriented, instead of informational.

12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

Does your paper address CONSORT subitem 12a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Independent t-test were conducted on continuous baseline variables, and chi-square analyses were conducted on categorical or nominal variables. Univariate effects of group membership on T2 outcomes were examined using between-subjects analysis of covariance (ANCOVA) adjusting for BL measures. Cohon's d effect sizes were calculated to examine the magnitude of between group differences. All subjects were included in intent-to-treat (ITT) analyses."

12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 12a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Prior to conducting the analyses above, the multiple imputation procedure in SPSS v. 23 was employed to handle missing data assumed to be missing at random (MAR). In the case of data not missing at random, as secondary analyses, we conducted completer analyses using 2x2 repeated measures analysis of variance (ANOVA) to explore relationships."

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

Does your paper address CONSORT subitem 12b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"As a secondary analysis, to explore whether any main effects existed, 2x2 repeated measures ANOVAS were conducted on the primary outcome variables (with the exception of PHQ-9) among completers only."

X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

X26-i) Comment on ethics committee approval

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The study was reviewed and approved by the Institutional Review Board.

x26-ii) Outline informed consent procedures

Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.

1 2 3 4 5 subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem X26-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participants indicated their consent to the terms of the study via checkbox on an information sheet."

X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

Does your paper address subitem X26-iii?

"In the case of individuals disclosing suicidal ideation or self-harm (n=2), Woebot sent a link to an evidence-based free app based on attention retraining principals "tec-tec" (http://tectectech.com/) that was designed to help individuals feel better about themselves and worse about self-harm and suicide. The individual was also sent emailed separately and offered support via HIPAA compliant, encrypted video conferencing. No individual availed of the offer."

RESULTS

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

Does your paper address CONSORT subitem 13a? *

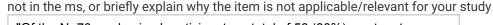
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"N=70 were randomized via computer algorithm to receive either a direct link to begin chatting with Woebot (n=34) in an instant messenger application, or the NIMH's ebook on depression among college students (n= 36), after completion of online questionnaires at BL."

13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information



"Of the N=70 randomized participants, a total of 56 (80%) went on to provide partial or complete data at T2 representing an overall attrition rate of 20%." We do not know why participants were lost to follow up.

13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

1 2 3 4 5

subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential



Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We have included an attrition diagram in the paper - see Figure 1 for participant recruitment flow.

14a) Dates defining the periods of recruitment and followup

Does your paper address CONSORT subitem 14a? *

Recruitment occurred from January 31st to February 20th, 2017. There was no follow-up period - only EOT.	
14a-i) Indicate if critical "secular events" fell into the study period	
Indicate if critical "secular events" fell into the study period, e.g., significant changavailable or "changes in computer hardware or Internet delivery resources"	jes in Internet resources

subitem not at all important O O o essential

Does your paper address subitem 14a-i?

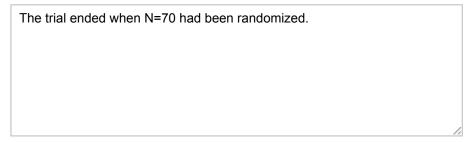
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There were no significant secular events during the study period.

1 2 3 4 5

14b) Why the trial ended or was stopped (early)

Does your paper address CONSORT subitem 14b? *



15) A table showing baseline demographic and clinical characteristics for each group

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

Does your paper address CONSORT subitem 15? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Table 1 shows the demographic information and baseline scores on clinical variables for the entire sample N=70."

15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

Does your paper address subitem 15-i? *

We did not collect information on digital divide issues. We did not assess educational status or socio-economic status.

16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 16-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).

	1	2	3	4	5	
subitem not at all important	0	0	0	0	0	essential

Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Table 2 shows the results of the primary ITT analyses conducted on the
entire sample."

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

Does your paper address CONSORT subitem 17a? *

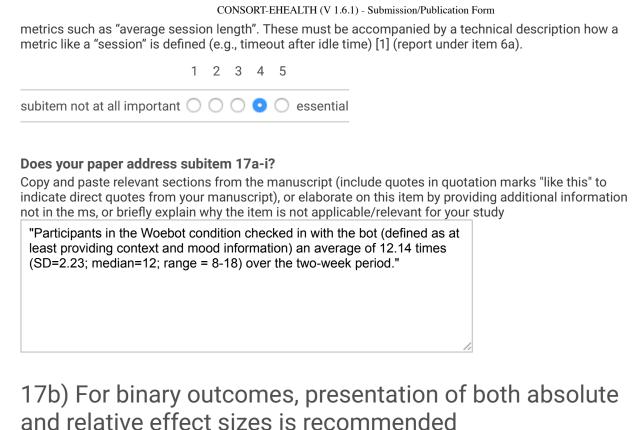
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Univariate ANCOVA revealed a significant treatment effect on depression revealing that those in the Woebot group significantly reduced PHQ-9 score while those in the information control group did not (F1, 48 = 6.03; p=.01) (see Figure 2). This represented a moderate between-groups effect size (.44). This effect is robust after Bonferonni correction for multiple comparisons (p=.04)."

These results are reflected in Table 2.

17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure



Does your paper address CONSORT subitem 17b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This is not applicable to the present study. There were no binary outcomes.	
	7

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing

pre-specified from exploratory

Does your paper address CONSORT subitem 18? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"2x2 repeated measures ANOVAS were conducted on the primary outcome variables (with the exception of PHQ-9) among completers only. A significant main effect was observed on GAD-7 (F1, 54 = 9.24; p=.004) suggesting that completers experienced a significant reduction in symptoms of anxiety between baseline and T2, regardless of the group to which they were assigned."

18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

See above in subitem 18.

19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

Does your paper address CONSORT subitem 19? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There were no harms or unintended effects in either group.

19-i) Include privacy breaches, technical problems

Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 19-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Technical problems were described by 8 individuals with technical glitches in general and looping conversational segments emerging as sub-themes."

19-ii) Include qualitative feedback from participants or observations from staff/researchers

Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.

1 2 3 4 5
subitem not at all important O O essential

Does your paper address subitem 19-ii?
Copy and paste relevant sections from the manuscript (incompared to the manuscript)

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Figures 3 and 4 show thematic maps of participant responses to questions regarding Woebot.

DISCUSSION

22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

1 2 3 4 5
subitem not at all important \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 22-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information

CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form not in the ms, or briefly explain why the item is not applicable/relevant for your study "The study confirmed that after two weeks, those in the Woebot group experienced a significant reduction in depression. Secondary analysis of completers suggested that anxiety also reduced in both groups thus our hypothesis was partially supported." 22-ii) Highlight unanswered new questions, suggest future research Highlight unanswered new questions, suggest future research. 1 2 3 4 5 subitem not at all important O O o essential Does your paper address subitem 22-ii? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study While this study suggests that certain process variables normally demonstrated in a traditional therapeutic relationship were present here after 2 weeks, future research should explore this question empirically, adopting a standardized instrument such as the Working Alliance Inventory to replicate the work of Bickmore and colleagues. 20) Trial limitations, addressing sources of potential bias,

imprecision, and, if relevant, multiplicity of analyses

20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

	ı	2	3	4	5	
all important	0	0	0	0	0	essential

subitem not at

Does your paper address subitem 20-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"As a feasibility study, we recruited a limited number of participants to receive a relatively short intervention, and no follow up data were available to assess whether gains were sustained."

21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The study was conducted in a New York university community population and since we did not formally assess digital divide factors such as socioeconomic status, findings may be limited in their generalizability.

21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.

1 2 3 4 5
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

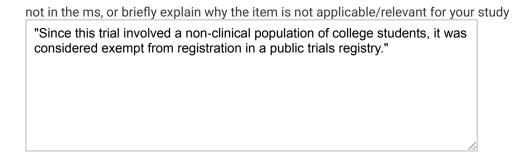
"This study suggests that conversational agent process factors, such as the ability to convey empathy, may be capable of both amplifying, and conversely, violating, a therapeutic process."

OTHER INFORMATION

23) Registration number and name of trial registry

Does your paper address CONSORT subitem 23? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information



24) Where the full trial protocol can be accessed, if available

Does your paper address CONSORT subitem 24? *

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This is not applicable to the current study.	
	/

25) Sources of funding and other support (such as supply of drugs), role of funders

Does your paper address CONSORT subitem 25? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The Life Ninja Project covered the cost of participant incentives, though the academic institution made the payments."

X27) Conflicts of Interest (not a CONSORT item)

X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

1 2 3 4 5
subitem not at all important O O essential

Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The second author (AMD) is the founder of a commercial entity Life Ninja that created the intervention ("Woebot") that is the subject of this trial and therefore has financial interest in that company. Neither KKF nor MV have any financial interest in Life Ninja. The Life Ninja Project, which is funded by a private angel investor, covered the cost of participant incentives, though the academic institution made the payments.

About the CONSORT EHEALTH checklist

As a result of using this checklist, did you make changes in your manuscript? *

yes, major changes

o yes, minor changes

viiat were the most impo	ortant changes you made as a result of using this checklist?
How much time did you s	pend on going through the checklist INCLUDING making changes in you
Roughly 4 hours.	
,	
As a result of using this c	hecklist, do you think your manuscript has improved? *
y es	
no	
Other:	
J	
Would you like to become	e involved in the CONSORT EHEALTH group?
•	nple becoming involved in participating in a workshop and writing an
This would involve for exam	
	n document
Explanation and Elaboration	ii document
This would involve for exam Explanation and Elaboration yes no	ii document

None.				

STOP - Save this form as PDF before you click submit

To generate a record that you filled in this form, we recommend to generate a PDF of this page (on a Mac, simply select "print" and then select "print as PDF") before you submit it.

When you submit your (revised) paper to JMIR, please upload the PDF as supplementary file.

Don't worry if some text in the textboxes is cut off, as we still have the complete information in our database. Thank you!

Final step: Click submit!

Click submit so we have your answers in our database!

Submit

Never submit passwords through Google Forms.

Powered by

This content is neither created nor endorsed by Google.

Report Abuse - Terms of Service - Additional Terms